

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Date::	07/25/03
Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	RADIOPHARMACEUTICALS FOR DIAGNOSING ALZHEIMER'S DISEASE
Attorney Docket Number::	SCH-1834C1
Total Drawing Sheets::	10

### INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Germany
Status::	FULL CAPACITY
Given Name::	Christoph-Stephan
Family Name::	Hilger
City of Residence::	Berlin
Country of Residence::	Germany
Street of Mailing Address::	Langenauer Weg 24
City of Mailing Address::	Berlin
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-13503

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Germany
Status::	FULL CAPACITY
Given Name::	Bernd
Family Name::	Johannsen
City of Residence::	Dresden
Country of Residence::	Germany
Street of Mailing Address::	Lausitzer Str. 5
City of Mailing Address::	Dresden
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-01324

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Germany  
Status:: FULL CAPACITY  
Given Name:: Joerg  
Family Name:: Steinbach  
City of Residence:: Bischofswerda  
Country of Residence:: Germany  
Street of Mailing Address:: Geschwister-Scholl-Str. 14  
City of Mailing Address:: Bischofswerda  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-01877

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Germany  
Status:: FULL CAPACITY  
Given Name:: Peter  
Family Name:: Maeding  
City of Residence:: Dresden  
Country of Residence:: Germany  
Street of Mailing Address:: Voglerstr. 19  
City of Mailing Address:: Dresden  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: D-01277

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Meredith  
Family Name:: Halks-Miller  
City of Residence:: Woodside  
State or Province of Residence:: California  
Country of Residence:: United States  
Street of Mailing Address:: 799 Glenerag Way  
City of Mailing Address:: Woodside  
State or Province of Mailing Address:: California  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 94062

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Richard  
Family Name:: Horuk  
City of Residence:: Lafayette  
State or Province of Residence:: California  
Country of Residence:: United States  
Street of Mailing Address:: 3410 Silver Springs Court  
City of Mailing Address:: Lafayette  
State or Province of Mailing Address:: California  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 94549

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Harald  
Family Name:: Dinter  
City of Residence:: San Rafael  
State or Province of Residence:: California  
Country of Residence:: United States  
Street of Mailing Address:: 80 De La Guerra  
City of Mailing Address:: San Rafael  
State or Province of Mailing Address:: California  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 94903

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Raju  
Family Name:: Mohan  
City of Residence:: Moraga  
State or Province of Residence:: California  
Country of Residence:: United States  
Street of Mailing Address:: 161 Selborne Way  
City of Mailing Address:: Moraga  
State or Province of Mailing Address:: California  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 94556

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Joseph  
Middle Name:: E.  
Family Name:: Hesselgesser  
City of Residence:: San Francisco  
State or Province of Residence:: California  
Country of Residence:: United States  
Street of Mailing Address:: 445 Burnett Avenue  
#103  
City of Mailing Address:: San Francisco  
State or Province of Mailing Address:: California  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 94131

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23599

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 23599

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
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This Application	Continuation of	09/985,938	11/06/01
09/985,938	Non-Provisional of	60/246,299	11/06/00

#### ASSIGNMENT INFORMATION

Assignee Name:: Schering AG  
 Street of Mailing Address:: Mullerstrasse 178  
 City of Mailing Address:: Berlin  
 Country of Mailing Address:: GERMANY  
 Postal or Zip Code of Mailing Address:: D-13353